PTO/SB/05 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

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LITH ITV	Attorne	ey Docket No. 220002064500								
UTILITY		oventor Krisztina M. ZSEBO								
PATENT APPLICATION TRANSMITTAL	Title	METHOD OF GENERATING AN IMMUNE RESPONSE AND COMPOSITIONS USED FOR SAME								
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Expre:	ess Mail Label No. EV336630196US								
	MS Patent Application									
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application cor	ontents.	ADDRESS TO: Commissioner for Patents P.O. Box 1450								
Foo Transmittal Form (a.g. PTO/SR/17) (1 page in du		Alexandria, VA 22313-1450 CD-ROM or CD-R in duplicate, large table or								
X Pee transmitted Form (e.g., F10/Sb17) (1 page in du (Submit an original, and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27.	трпоато <i>ј</i>	7. CD-R in duplicate, targe table of Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)								
3. X Specification [Total Pages 32	2]	a. Computer Readable Form (CRF)								
(preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table,		b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies								
or a computer program listing appendix - Background of the Invention		ACCOMPANYING APPLICATIONS PARTS								
Brief Summary of the Invention Brief Description of the Drawings (if filed)	ļ	9. Assignment Papers (cover sheet & document(s))								
Detailed Description Claim(s)	,	37 CFR 3.73(b) Statement Power of								
- Abstract of the Disclosure	<u>-</u>	(when there is an assignee)								
4. X Drawing(s) (35 U.S.C. 113) [Total Sheets	<u>-</u> '.	11. English Translation Document (if applicable) Information Disclosure Copies of IDS								
5. Oath or Declaration [Total Sheets]]	Statement (IDS)/PTO-1449 Litations								
a. Newly executed (original or copy)	!	13. Preliminary Amendment								
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	1	14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s)								
i. DELETION OF INVENTOR(S) Signed statement attached deleting	ſ	(if foreign priority is claimed)								
inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	,	16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(6)(1). Applicant must attach form PTO/SB/35 or its equivalent.								
	ı	17. Other:								
6. X Application Data Sheet. See 37 CFR 1.76 (4 pages)										
18. If a CONTINUING APPLICATION, check appropriate box, following the title, or in an Application Data Sheet under 37 CF.	, and supp =R 1.76:	oly the requisite information below and in the first sentence of the specification								
Continuation Divisional Continuation		CIP) of prior application No.:								
Prior application information: Examiner		Art Unit:								
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.										
		ONDENCE ADDRESS								
X Customer Number:		25226 OR Correspondence address below								
Name										
Address										
City Sta	tate	Zip Code								
Country Te	elephone	Fax								
Name (Print/Type) Shantanu Basu		Registration No. (Attorney/Agent) 43,318								
Signature heurten Lan	4	Date August 21, 2003								
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV336630196US, in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. Dated: August 21, 2003 Signature: (Anthony Soljanich)										



PTO/SB/17 (05-03)
Approved for use through 04/30/2003. OMB 0651-0032
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FEE TRANSMITTAL for FY 2003			Complete if Kn wn								
			cation	Numbe	er N	Not Yet A	ot Yet Assigned				
			Filing Date				Concurrently Herewith				
Effective 01/01/2003, Patent fees are subject to annual revision.			First Named Inventor				Krisztina M. ZSEBO				
Ellective 01/01/2003, Faterit rees are subject to annual revision.			Examiner Name				Not Yet Assigned				
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit				Not Yet Assigned				
TOTAL AMOUNT OF PAYMENT (\$) 561.00		Attorney Docket No. 220002064500									
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)									
Check Credit Money Other None	3. ADDITIONAL FEES										
Card Corder C	3. ADDITIONAL FEES										
X Deposit Account	Laura Satitus Carall Satitus										
Deposit Account 03-1952	Fee	arge Entity Small Entity Fee Fee Fee Fee									
Number	Code	(\$)	Code	(\$)		Fee Description Fe					
Deposit Account Morrison & Foerster LLP	1051	130	2051	65	-	rcharge late filing fee or oath					
Name The Director is hereby authorized to: (check all that apply)	1052	50	2052	25	Surcharge – sheet.	arge – late provisional filing fee or cover					
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	glish specification					
Charge any additional fee(s) during the pendency of this	1812	2,520	1812		For filing a rec						
application application	i		l		-						
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Examiner act	i =					
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting p Examiner act						
FEE CALCULATION	1251	110	2251	55	Extension for	r reply within					
1. BASIC FILING FEE	1252	410	2252	205			second month				
Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid	1253	930	2253	465	Extension for			<u> </u>			
Code (\$) Code (\$)	1254	1,450	2254	725	Extension for	r reply withir	fourth month				
1001 750 2001 375 Utility filing fee 375.00	1255	1,970	2255	985	Extension for reply within fifth month						
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal						
1003 520 2003 260 Plant filing fee 1004 750 2004 375 Reissue filing fee	1402 1403	320 280	2402	160	Filing a brief in support of an appeal						
1004 750 2004 375 Reissue filing fee 1005 160 2005 80 Provisional filing fee	1403	1,510	1451	140	Request for oral hearing Petition to institute a public use proceeding			<u> </u>			
	1452	110	2452	55		tition to revive – unavoidable					
SUBTOTAL (1) (\$) 375.00	1453	1,300	2453	650	Petition to re-	tion to revive - unintentional					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,300	2501	650	Utility issue for	issue fee (or reissue)					
Extra Fee from Claims below Fee Paid	1502	470	2502	235	Design issue	issue fee					
Total Claims 36 -20** = 16 x 9 = 144.00	1503	630	2503 315 Plant issue fee								
Independent 4 -3** = 1 x 42 = 42.00	1460	130	1460	130	Petitions to the Commissioner						
Multiple Dependent 140 = 0.00	1807	50	1807	50	Processing fe	ng fee under 37 CFR 1.17(q)					
Large Entity Small Entity	1806	180	1806	180	Submission of	on of Information Disclosure Strnt					
Fee Fee Fee Fee Fee Description		40	8021	40			ssignment per				
1202	1809	property (times number of properties) 809 750 2809 375 Filing a submission after final rejection									
1201 84 2201 42 Independent claims in excess of 3]		50 2809 375 (37 CFR 1.129(a))								
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375		For each additional invention to be examined (37CFR 1.129(b))					
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	375	•	Request for Continued Examination (RCE)					
1205 18 2205 9 ** Reissue claims in excess of 20	1802					or expedited examination n application					
and over original patent	Other	Other fee (specify)									
SUBTOTAL (2) (\$) 186.00	*Red	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00									
**or number previously paid, if greater, For Reissues, see above											
SUBMITTED BY						Complete (if applicable)				
Name (Print/Type) Shantanu Basu		ration No ey/Agent)		,318		Telephone	(650) 813-5995				
Signature Shewtern Dale						Date	August 21, 200	3			